

Effective January 1, 2011

WILLIAMSON COUNTY GOVERNMENT & BOARD
OF EDUCATION



Most healthcare providers will submit claims on behalf of the insured. If your doctor does not provide this service, you may submit the claim and receive the same level of benefits.

HOW TO SUBMIT A CLAIM

1. Obtain a copy of the provider's itemized statement
2. Go to ameritasgroup.com and print an Ameritas Eye Care Claim Form and complete according to directions on the form.

Claim Questions:
1-800-255-4931

ameritasgroup.com

LASIK or PRK

Average discount of 15% off retail price, or 5% off promotional price through

U.S. Laser Network

Vision Insurance

Underwritten by Ameritas Life Insurance Corp

Williamson County Government & Board of Education provides access to vision insurance through Ameritas Life Insurance. All full-time employees and eligible dependents may apply for this coverage. Premiums are paid by the employee through payroll deduction.

Qualifying for Benefits

Benefits cover a **routine eye exam every 12 months**, and **one** of the following:

- *A set of frames every 12 months & two lenses (one pair) each 12 months, **or***
- *Contact lenses*

No Provider Network

You have the freedom to choose any optometrist or ophthalmologist and receive the below listed benefits. However, should select an EyeMed provider additional discounts may apply. To find an EyeMed provider visit **ameritasgroup.com**.

Exams (A)	Frames & Lenses (B), or	Contact Lenses (C)
Exams: up to \$75 <i>One exam each 12 months</i>	Frames: up to \$125 <i>One set each 12 months</i> Lenses: \$50 for single vision \$75 for bifocal \$100 for trifocal \$100 for lenticular <i>One pair each 12 months</i>	Contact Lenses: up to \$175 <i>One set each 12 months</i>

Monthly Rates:

Employee Only	\$9.16
Employee + 1 Dependent	\$17.16
Family	\$26.20



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Limitations and Exclusions

Discounts from providers on the EyeMed Access Network are only available to groups who have a specific schedule/defined benefit eye care plan in place. The discounts may not be combined with any other discounts or promotional offers. Retail prices may vary by location.

Discounts are not available for the following procedures, material or services:

- Orthoptic or vision training, subnormal vision aids, and any associated supplement testing
- Medical and/or surgical treatment of the eye, eyes, or supporting structures
- Corrective eye wear required by an employer as a condition of employment, and safety eye wear unless specifically covered under the plan
- Services provided as a result of any Worker's Compensation law
- Plano non-prescription lenses and non-prescription sunglasses (except for 20% discount)
- EyeMed's providers' professional services or disposable contact lenses
- Two pairs of glasses in lieu of bifocals

**Premiums may
be pre-taxed
under
125 Plan**

125 Plan allows premiums to be withheld on a pre-tax basis. Electing coverage, changing coverage or dropping coverage can be done only:

- 1) *within 31 days of the date an employee first becomes eligible, loses eligibility or has a family status change***
- 2) *During an annual election period***

Questions?

Please contact:

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